

SUPPLEMENTAL APPLICATION DATA SHEET

Application Information

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| Application number:: | <u>10/517,741</u> |
| Filing Date:: | <u>January 30, 2006</u> |
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | |
| Number of CD disks:: | |
| Number of copies of CDs:: | |
| Sequence submission?:: | CRF |
| Computer Readable Form (CRF)?:: | Yes |
| Number of copies of CRF:: | |
| Title :: | METHOD AND NUCLEIC ACIDS FOR THE IMPROVED TREATMENT OF BREAST CELL PROLIFERATIVE DISORDERS |
| Attorney Docket Number:: | 47675-93 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | |
| Small Entity?:: | Yes |
| Petition included?:: | No |
| Petition Type:: | |
| Licensed U.S. Gov't Agency:: | No |
| Contract or Grant No:: | |

Secrecy Order in Parent Appl.?:: No

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: NL
Status:: Full capacity
Given Name:: John
Middle Name::
Family Name:: Foekens
Name Suffix::
City of Residence:: Rotterdam
State or Province of Residence::
Country of Residence:: NL
Street of mailing address:: Filosofentuin 35
City of mailing address:: Rotterdam
State or Province of mailing address::
Country of mailing address:: NL
Postal or Zip Code of mailing address:: 2908 XA

Second Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full capacity
Given Name:: Nadia
Middle Name::
Family Name:: Harbeck
Name Suffix::

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| City of Residence:: | Otterfing |
| State or Province of Residence:: | |
| Country of Residence:: | DE |
| Street of mailing address:: | Palnkamer Strasse 49 |
| City of mailing address:: | Otterfing |
| State or Province of mailing address:: | |
| Country of mailing address:: | DE |
| Postal or Zip Code of mailing address:: | 83624 |

Third Applicant Information

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|---|----------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | DE |
| Status:: | Full authority |
| Given Name:: | Thomas |
| Middle Name:: | |
| Family Name:: | Koenig |
| Name Suffix:: | |
| City of Residence:: | Berlin |
| State or Province of Residence:: | |
| Country of Residence:: | DE |
| Street of mailing address:: | Skalitzer Strasse 18 |
| City of mailing address:: | Berlin |
| State or Province of mailing address:: | |
| Country of mailing address:: | DE |
| Postal or Zip Code of mailing address:: | 10999 |

Fourth Applicant Information

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| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | DE |
| Status:: | Full authority |
| Given Name:: | Sabine |
| Middle Name:: | |
| Family Name:: | Maier |
| Name Suffix:: | |
| City of Residence:: | <u>Brussels</u> |
| State or Province of Residence:: | |
| Country of Residence:: | <u>BE</u> |
| Street of mailing address:: | <u>Rue d’Espagne 93</u> |
| City of mailing address:: | <u>Brussels</u> |
| State or Province of mailing address:: | |
| Country of mailing address:: | <u>BE</u> |
| Postal or Zip Code of mailing address:: | <u>1060</u> |

Fifth Applicant Information

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| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | NL |
| Status:: | Full authority |
| Given Name:: | John |
| Middle Name:: | <u>W.</u> |
| Family Name:: | Martens |
| Name Suffix:: | |
| City of Residence:: | Rotterdam |
| State or Province of Residence:: | |

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|---|-----------------|
| Country of Residence:: | NL |
| Street of mailing address:: | Schiekade 121 h |
| City of mailing address:: | Rotterdam |
| State or Province of mailing address:: | |
| Country of mailing address:: | NL |
| Postal or Zip Code of mailing address:: | <u>3033 BK</u> |

Sixth Applicant Information

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|---|---------------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | DE |
| Status:: | Full authority |
| Given Name:: | Fabian |
| Middle Name:: | |
| Family Name:: | Model |
| Name Suffix:: | |
| City of Residence:: | Berlin |
| State or Province of Residence:: | |
| Country of Residence:: | DE |
| Street of mailing address:: | <u>Debenzerstrasse 73</u> |
| City of mailing address:: | Berlin |
| State or Province of mailing address:: | |
| Country of mailing address:: | DE |
| Postal or Zip Code of mailing address:: | 12683 |

Seventh Applicant Information

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|---|-------------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | DE |
| Status:: | Full authority |
| Given Name:: | Inko |
| Middle Name:: | |
| Family Name:: | Nimmrich |
| Name Suffix:: | |
| City of Residence:: | Berlin |
| State or Province of Residence:: | |
| Country of Residence:: | DE |
| Street of mailing address:: | Heinz-Kapelle-Strasse 9 |
| City of mailing address:: | Berlin |
| State or Province of mailing address:: | |
| Country of mailing address:: | DE |
| Postal or Zip Code of mailing address:: | 10407 |

Eighth Applicant Information

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| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | DE |
| Status:: | Full authority |
| Given Name:: | Tamas |
| Middle Name:: | |
| Family Name:: | Rujan |
| Name Suffix:: | |
| City of Residence:: | Berlin |
| State or Province of Residence:: | |

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|---|--------------------------|
| Country of Residence:: | DE |
| Street of mailing address:: | <u>Muehsamstrasse 64</u> |
| City of mailing address:: | Berlin |
| State or Province of mailing address:: | |
| Country of mailing address:: | DE |
| Postal or Zip Code of mailing address:: | <u>10249</u> |

Ninth Applicant Information

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|---|----------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | DE |
| Status:: | Full authority |
| Given Name:: | Armin |
| Middle Name:: | |
| Family Name:: | Schmitt |
| Name Suffix:: | |
| City of Residence:: | Berlin |
| State or Province of Residence:: | |
| Country of Residence:: | DE |
| Street of mailing address:: | Hortensienstrasse 29 |
| City of mailing address:: | Berlin |
| State or Province of mailing address:: | |
| Country of mailing address:: | DE |
| Postal or Zip Code of mailing address:: | 12203 |

Tenth Applicant Information

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|---|-------------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | DE |
| Status:: | Full authority |
| Given Name:: | Manfred |
| Middle Name:: | |
| Family Name:: | Schmitt |
| Name Suffix:: | |
| City of Residence:: | Munich |
| State or Province of Residence:: | |
| Country of Residence:: | DE |
| Street of mailing address:: | Hohenaschauerstrasse 10 |
| City of mailing address:: | Munich |
| State or Province of mailing address:: | |
| Country of mailing address:: | DE |
| Postal or Zip Code of mailing address:: | 81669 |

Eleventh Applicant Information

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|----------------------------------|----------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | NL |
| Status:: | Full authority |
| Given Name:: | Maxime |
| Middle Name:: | P. |
| Family Name:: | Look |
| Name Suffix:: | |
| City of Residence:: | Amsterdam |
| State or Province of Residence:: | |

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|---|----------------------|
| Country of Residence:: | NL |
| Street of mailing address:: | Stade de Colombes 55 |
| City of mailing address:: | Amsterdam |
| State or Province of mailing address:: | |
| Country of mailing address:: | NL |
| Postal or Zip Code of mailing address:: | <u>1098 VS</u> |

Twelfth Applicant Information

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|---|--------------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | DE |
| Status:: | Full authority |
| Given Name:: | Almuth |
| Middle Name:: | |
| Family Name:: | Marx |
| Name Suffix:: | |
| City of Residence:: | <u>Nuernberg</u> |
| State or Province of Residence:: | |
| Country of Residence:: | DE |
| Street of mailing address:: | <u>Viatissstrasse 88</u> |
| City of mailing address:: | <u>Nuernberg</u> |
| State or Province of mailing address:: | |
| Country of mailing address:: | DE |
| Postal or Zip Code of mailing address:: | <u>90480</u> |

Thirteenth Applicant Information

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|---|----------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | AT |
| Status:: | Full authority |
| Given Name:: | Heinz |
| Middle Name:: | |
| Family Name:: | Hoefler |
| Name Suffix:: | |
| City of Residence:: | Munich |
| State or Province of Residence:: | |
| Country of Residence:: | DE |
| Street of mailing address:: | Ismaningerstrasse 64 |
| City of mailing address:: | Munich |
| State or Province of mailing address:: | |
| Country of mailing address:: | DE |
| Postal or Zip Code of mailing address:: | 81675 |

Correspondence Information

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|---|---------------------|
| Correspondence Customer Number:: | 22504 |
| Name:: | |
| Street of mailing address:: | |
| City of mailing address:: | |
| State or Province of mailing address:: | |
| Country of mailing address:: | |
| Postal or Zip Code of mailing address:: | |
| Phone number:: | <u>206-757-8023</u> |
| Fax Number: | |

E-Mail address::

barrydavison@dwt.com

Representative Information

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| Representative Customer Number:: | | 22504 |
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Domestic Priority Information

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| Application :: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This application | National stage of | PCT/EP2003/010881 | 10/01/03 |
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Foreign Priority Information

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|-----------|----------------------|---------------|--------------------|
| Country:: | Application number:: | Filing Date:: | Priority Claimed:: |
| DE | 10245779.4 | 10/01/02 | Yes |
| DE | 10300096.8 | 01/07/03 | Yes |
| DE | 10317955.0 | 04/17/03 | Yes |

Assignee Information

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|---|-------------------------------------|
| Assignee name:: | <u>Epigenomics AG</u> |
| Street of mailing address:: | <u>Kleine Praesidentenstrasse 1</u> |
| City of mailing address:: | <u>Berlin</u> |
| State or Province of mailing address:: | |
| Country of mailing address:: | <u>DE</u> |
| Postal or Zip Code of mailing address:: | <u>10178</u> |